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TO: Examiner M. Chery
U.S. Patent & Trademark Office
Group Art Unit 2188

FROM: Michael K. O'Neill (Reg. No. 32,622)

RE: U.S. Application No. 10/628,404
Atty. Docket No.: 00862.023154.

FAX NO.: (571)273-8300

DATE: May 20, 2009 **NO. OF PAGES:** 16
(including cover page)

TIME: 5:25 pm. **SENT BY:** Dawn

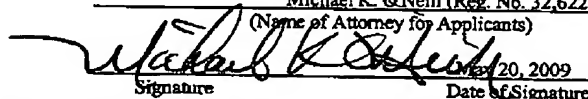
MESSAGE

Attached hereto is an Amendment Transmittal and an Amendment.

I hereby certify that this correspondence is being transmitted via facsimile to
the U.S. Patent and Trademark Office at (571) 273-8300, on
May 20, 2009
(Date of Transmission)

Michael K. O'Neill (Reg. No. 32,622)

(Name of Attorney for Applicants)


Signature Date of Signature May 20, 2009

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In re Application of:

Docket No. 00862.023154.

NORIYUKI SUZUKI, et al.

Application No.: 10/628,404

Examiner: M. Chery

Filed: July 29, 2003

Group Art Unit: 2188

For: STORAGE UNIT, INFORMATION PROCESSING
APPARATUS, AND EJECT CONTROL METHOD
FOR STORAGE UNIT

Date: May 20, 2009

Commission For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below


CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 14	MINUS	** 20	= 0	x \$26 \$52	0
INDEP. CLAIMS	* 2	MINUS	*** 3	= 0	x \$110 \$220	0
Fee for Multiple Dependent claims \$195°/\$390						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
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May 20, 2009
(Date of Transmission)


Michael K. O'Neill (Reg. No. 32,622)
(Name of Attorney for Applicants)


Signature

May 20, 2009
Date of Signature

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Michael K. O'Neill
Attorney for Applicants
Registration No.: 32,622

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